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PTO/SB/21 (04-04)
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10,789,211

Feb. 27, 2004

Application Number

Filing Date

| FORM | | | First Named Inventor | Kellerma | n | |
|---|-------------|--------------------------|---|----------|--|--|
| (to be used for all correspondence after initial filing) | | | Art Unit | not know | n | |
| | | | Examiner Name | not know | n | |
| Total Number of Pages in This Submission | | | Attorney Docket Number | 142555 - | NIEL-0001-100 | |
| | | ENCLO | SURES (check all that apply) | <u> </u> | | |
| Fee Transmittal F | Form | ☐ Drawing(s) | | | Allowance Communication to ology Center (TC) | |
| Fee Attached | I | Licensing-related Papers | | | Il Communication to Board of als and Interferences | |
| Amendment / Rep | ply | Petition | n | | Il Communication to TC al Notice, Brief, Reply Brief) | |
| After Final | | | n to Convert to a ional Application | Propri | etary Information | |
| Affidavits/dec | laration(s) | | of Attorney, Revocation e of Correspondence Address | ☐ Status | Letter | |
| Extension of Time Request | | Termir | Terminal Disclaimer | | Other Enclosure(s) (please identify below): | |
| Express Abandonment Request | | | st for Refund umber of CD(s) | | | |
| ☐ Information Disclosure Statement | | | | | | |
| Certified Copy of Priority Document(s) | | Rema | rks | <u> </u> | | |
| Response to Miss Incomplete Applic | | | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | |
| | SIGNA | TURE OF | APPLICANT, ATTORNEY, C | R AGENT | | |
| Firm or Brian L. Belles Individual name | | | | | | |
| Signature Buan L. Bolles | | | Belle | | | |
| Date May 24, 2004 | | | | | | |
| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | |
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Kellerman et al

Serial No.: 10/789,211 Group Art Unit: Not Yet Assigned

Filing Date: Feb. 27, 2004 Examiner: Not Yet Assigned

For: METHOD AND APPARATUS FOR MEASURING RELATIVE HUMIDITY OF A

MIXTURE

DATE OF DEPOSIT: 5/24/07

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ALEXANDRIA, VA 22313-1450

TYPED NAME Brian L. Belles REGISTRATION NO: 51,322

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 C.F.R. §§ 1.56 and in accordance with 37 C.F.R. §§ 1.97 and 1.98, information relating to the above-identified application is hereby disclosed, the Examiner in charge of the above-identified application is requested to consider and make of record the references listed on the PTO Form SB/08A and PTO Form SB/08B, formerly known as PTO Form 1449 submitted herewith.

Inclusion of the information submitted herewith is not to be construed as an admission that the information is material as that term is defined in 37 C.F.R. § 1.56(b).

In accordance with 37 C.F.R. § 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made.

| This l | Information Disclosure Statement is being filed: |
|-------------|--|
| \boxtimes | within three months of the filing date of the patent application. |
| | within three months of the date of entry into the national stage as set forth in 37 C.F.R. § 1.491 of the international application. |
| \boxtimes | before the mailing date of a first Office Action on the merits. |
| | Copies of references (A-KK) listed on the attached PTO Form SB/08A and PTO Form SB/08B, formerly known as PTO Form 1449 are <u>not</u> enclosed. |
| | |
| Petitio | on . |
| | Applicant(s) hereby petitions the Assistant Commissioner to consider the references listed in this Information Disclosure Statement, on the enclosed PTO Form SB/08A and PTO Form SB/08B, formerly known as PTO Form 1449, and the examination of the above-identified patent application. |
| Fees | |
| \boxtimes | No Fee is owed by the applicant(s). |
| | The Information Disclosure Statement Fee of \$180.00 under 37 C.F.R. § 1.17(p) is enclosed herewith. |
| | The Petition Fee of \$130.00 under 37 C.F.R. § 1.17(i)(1) is enclosed herewith. |
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| | Attached is a check in the amount of \$ This form is submitted in duplicate. |
| | Charge Deposit Account No. 50-1275 in the amount of \$ This form is submitted in duplicate. |
| \boxtimes | Please charge any deficiency or credit any overpayment to Deposit Account 50-1275. |

No fee or Statement is required under 37 C.F.R. § 1.97(b).

Respectfully submitted,

Dated: 5/24/04

Brian L. Belles Registration No. 51,322

COZEN O'CONNOR, P.C. 1900 Market Street, 6th Floor Philadelphia, PA 19103-3508 (215) 665-2000 – Telephone (215) 701-2013 - Facsimile

PTO/SB/08a (08-03)
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Substitute for form 1449A/PTO Complete if Known Application Number 10.789,211 INFORMATION DISCLOSURE Filing Date Feb. 27, 2004 STATEMENT BY APPLICANT First Named Inventor Richard Kellerman Art Unit not known (Use as many sheets as necessary) Examiner Name not known Sheet of 2 Attorney Docket Number 142555 NIEL-0001-100

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| Initials* | No.1 | Country Code ³ - Number ⁴ - Kind Code ⁵ (<i>if known</i>) | Date MM-DD-YYYY | Applicant of Cited Document | Passages or Relevant Figures Appear | T⁵ |
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Complete if Known Application Number 10/789,211 Filing Date Feb. 27, 2004 Richard Kellerman First Named Inventor Art Unit unknown Examiner Name unknown

(Use as many sheets as necessary) 142555 NIEL-0001-100 Sheet Attorney Docket Number of

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